

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22507

Entity Name: KELLY GREENS SINGLE FAMILY CONDOMINIUM I
ASSOCIATION, INC.**FILED**
Apr 10, 2018
Secretary of State
CC9177234084**Current Principal Place of Business:**12553 NEW BRITTANY BLVD.
SUITE 32
FORT MYERS, FL 33907**Current Mailing Address:**12553 NEW BRITTANY BLVD.
SUITE 32
FORT MYERS, FL 33907 US**FEI Number: 65-0037604****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LONG, DIANNA J
12553 NEW BRITTANY BLVD.
SUITE 32
FORT MYERS, FL 33907 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE: DIANNA J. LONG****04/10/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** TREASURER
Name TERWILLIGER, RICHARD
Address 12553 NEW BRITTANY BLVD.
SUITE 32
City-State-Zip: FORT MYERS FL 33907**Title** VP
Name STRAWBRIDGE, DALE
Address 12553 NEW BRITTANY BLVD.
SUITE 32
City-State-Zip: FORT MYERS FL 33907**Title** PRESIDENT
Name SIMEONE, LINDA
Address 12553 NEW BRITTANY BLVD.
SUITE 32
City-State-Zip: FORT MYERS FL 33907**Title** SECRETARY
Name WESSLING, EDWARD
Address 12553 NEW BRITTANY BLVD.
SUITE 32
City-State-Zip: FORT MYERS FL 33907**Title** D
Name CLAUSER, HERMAN
Address 12553 NEW BRITTANY BLVD.
SUITE 32
City-State-Zip: FORT MYERS FL 33907

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA SIMEONE**PRESIDENT****04/10/2018**

Electronic Signature of Signing Officer/Director Detail

Date